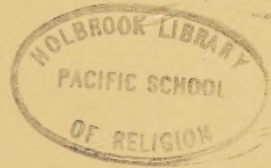


Journal of

CLINICAL PASTORAL WORK



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JOURNAL OF CLINICAL PASTORAL WORK

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Dear Journal Subscriber:

Enclosed is Volume 1 Number 4 of the Council's JOURNAL OF CLINICAL PASTORAL WORK. This completes the first full volume of four issues. If you will recall, Volume 1 Number 1 was the Autumn 1947 issue. Volume 1 Number 2 was the Winter 1947 issue. Volume 1 Number 3 was the Summer 1948 issue, and Volume 1 Number 4 is the Winter 1948 issue. Volume 1, therefore, extends over the calendar years of 1947 and 1948.

Launching a new journal is a perilous venture. You can guess at some of the problems. First there was the initial financing. Then came the problem of finding sufficient suitable material. Then came the problem of the time of the editor and his assistants. You have been very understanding by and large, and have not complained too much.

We are sincerely hopeful of being able to have the Journal appear more regularly from now on. The material for Volume 2 Number 1 is almost ready and will go to the printer soon. It will be the Spring 1949 issue.

We have kept careful record of the time when your subscription started. Regardless of volume and issue number, you will receive four consecutive issues of the Journal.

We feel that \$2.00 per year, 75¢ per copy, is a very reasonable charge for the Journal. Because of the additional drain upon the secretary's time in making out bills, only prepaid subscriptions to the Journal will be honored.

The editorial staff will appreciate any comments you wish to make about the Journal or its contents. We want it to be useful to you and we need some direction from you.

Sincerely yours,

Frederick C. Kuether
Frederick C. Kuether,
Managing Editor

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TO BRING together descriptive accounts of pastoral work with individuals and groups, in parish, hospital, and prison, and to encourage parish clergy and chaplains to share their understanding and methods.

TO DEMONSTRATE the use of concise note-taking in clarifying the pastoral process and in providing a factual basis for pastoral work.

TO CLARIFY from specific pastoral situations, both the religious needs of the parishioner and the principles of relating to other professions also concerned with a ministry to people; especially medicine, penology, social work, nursing, and education.

TO USE the insights of other professions, not in imitation of these professions, but as a means of further strengthening the clergyman's understanding of the needs and resources of his people and of his role and relationship to them.

TO THROW light on the elements of normal Christian living through clinical accounts of the pastoral care of the adequate and wholesome person.

TO CONSIDER the principles and methods of Clinical Pastoral Training of the theological student, the nature of the supervision involved, and its relation to other elements in the curriculum; recognizing the growing interest in this educational approach in helping the student make real in understanding and practice his work in the seminary.

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AMERICAN PROTESTANTISM AND MENTAL HEALTH

Many of the Preparatory Commissions which met prior to the International Congress on Mental Health were multi-disciplined, and sought to break down barriers between physicians, psychiatrists, psychologists, educators, caseworkers, and clergymen.

The following report was submitted by a group of Council supervising chaplains as their Preparatory Commission Report to the International Congress.

American Protestantism has frequently made critical and tragic errors in its presentation of the Christian religion—errors which have contributed to emotional and spiritual conflict and immaturity in our people. Most of these errors find a focus in a stern, legalistic, absolute, and Pharasaical moralism which is the characteristically American form of Puritanism. There is validity in the spirit and in many of the pointed criticisms of Dr. Brock Chisholm's William Alanson White Memorial Lectures. American Protestantism must accept considerable responsibility for the propagation of this unhealthy morality. To be more specific about this matter:

(1) One of the most common errors found in the churches is an unhealthy *authoritarianism*. Too frequently we develop fear, submissiveness, dependence, and guilt as a result of that attitude. Some of the very things that Jesus condemned in the religious leaders of his time have been perpetuated in the Christian Church, such as harshly inhuman moral judgments and an over-emphasis on minute, but very strict requirements for piety.

Many clergy make a point of telling their people what they are to do, and how they are to act. This is more than an undertone in many sermons. In this way one pastor boasted to his colleagues concerning his method of dealing with a parish problem. "I put them straight in no uncertain terms that now they consult me before they do *anything*. They just take my word, and depend on me to make those decisions for them as to what's right and what's wrong." That attitude is not conducive to the growth and maturation of the laity. Also there is room for speculation regarding the motivations of this sort of clergyman.

It seems clear that if matters are to be improved, the clergy generally will have both to learn some principles of mental hygiene and gain some insight into their own individual motivations.

(2) Churches have had *too little concern for understanding why* people behave as they do and have been most *relentless in their condemnation* of acts contrary to social standards, with the result that many have responded with intense guilt feelings. Guilt creates conflicts and tensions. The guilty feel a sense of fear, loneliness, and rejection and the result is various degrees of emotional disturbance. It seems that the Church could be more effective if it would give due recognition to background experience responsible for present reactions, and make free use of the Christian principle of forgiveness. Apparently the Church has been more concerned with the various theological interpretations of sin than a sincere attempt to help just individuals to life. The emphasis upon "revival meeting conversion"

has not been conducive to a long range program of personality development that will enable the individual to meet all the exigencies of life.

(3) There is another point at which the Church has frequently departed both from the teachings of its founders and the accepted principles of mental health. Either directly or indirectly we have taken the point of view that *sex is morally wrong*. Notice how the following unhealthy interpretations of Christian doctrine imply this negative attitude toward sex.

The doctrine of original sin is sometimes used to imply that the first man and first woman did wrong in having sex-relations and as a geneological result all men are born sinners.

The doctrine of the virgin birth, whatever we may believe about it, has been used to suggest that the ordinary means of procreation are tainted with wrong-doing.

Baptism has been interpreted as the act of cleansing the infant from the sin involved in his having been born.

We believe that these errors represent a departure from the Gospels and the whole spirit of the life and teaching of Jesus of Nazareth. He was humble and not authoritarian in his dealings with people.¹ The authority with which he spoke was in contrast to the authoritarianism of the Scribes,² and he reserved his anger for the legalists and moralists of his day, the Pharisees.³ He was understanding and not condemnatory of those involved in sin.⁴ He nowhere condemned the sexual impulse as in itself immoral, but reserved judgment for its expression in lust.⁵

We believe, too, that the unhealthy trends observed above do not represent the deepest and best in the Christian tradition or in the contemporary church. In contrast to the authoritarianism mentioned there is a continuous strain of emphasis upon human freedom from the Gospels' "Ye shall know the truth and the truth shall make you free," and St. Paul's "Thou art no more a servant, but a son," through the Reformation doctrine of the "priesthood of all believers," and down to the practice in many Churches today of following democratic procedure in all phases of their lives. Following in this tradition, The Rt. Rev. Angus Dun in a recent address said that our human pride constantly moves us to solidify our own or our Church's present apprehension of truth or righteousness as possessing the utter finality which belongs to God alone. This position regards all authoritarianism as essentially sinful.

In contrast to the rigid condemnation of all violations of the moral code, sometimes seen in religious groups and individuals, is the basic Christian belief that the good life cannot be codified at all, but is a matter of feelings and attitudes. The "good news" of the New Testament involves essentially this: that the Christian is under no law, but has been freed from all legal bondage to a fuller and more spontaneous love toward

¹ Matthew 19:17

² Matthew 7:29

³ Matthew 23:13-33

⁴ John 8:3-11

⁵ Matthew 5:22-28

with his Creator and his fellows. The doctrine of original sin which, as suggested above, has been used so frequently in an unhealthy manner, is to be interpreted as recognition of our human limitations and imperfections and thus leads directly to an attitude of understanding rather than condemnation. This tradition of tolerant understanding as opposed to rigidity and condemnation in moral matters is old and central in the Christian tradition and is growing in contemporary Protestantism.

The negative view of sex is also a perversion of essential Christianity. In spite of the Pauls and the Augustines who became Christians through conversion and a denial of physical impulse, there has been a constant affirmation in Christian doctrine of the essential goodness of the body. In Genesis we read, "And God saw everything he had made, and, behold it was very good." The Christian tradition has generally believed in the essential goodness of the physical appetites and has seen evil only in their perversions, such as gluttony, sloth, and lust. The doctrine of the incarnation implies not only that God was good enough to assume human form, but that the human body was good enough to house the divine spirit. As G. M. Chesterton points out, commenting on the theology of Thomas Aquinas, "(This) was a new reason for regarding the senses, and the sensations of the body, and the experiences of the common man, with a reverence no man in the ancient world could have begun to understand . . . It was no longer possible for the soul to despise the senses, which had been the organs of something that was more than man. Plato might despise the flesh; but God had not despised it." This theme is more significant in the Christian tradition (and certainly healthier) than the asceticism and negation concerning the physical impulses, about which we so often hear.

Resources of the Church for the Application of Mental Hygiene Principles

Now let us see how some of the traditional methods of the church can be used to foster mental health.

Worship: It is now seen by many students of interpersonal relations, that a major factor making for difficulties in living is to be found in the individual's feeling that he is in some sense "different" from others. Thus to protect himself from the anxieties attendant upon this awareness, or the threat of its awareness, we often find resulting a socially unacceptable form of behavior, which in its most dramatic manifestation could be termed mental illness. To be able to provide for such a person both support and an opportunity to consider the very factors which were productive of the sense of estrangement, is one of the tasks of the worship experience of the church.

In worship the Church's major "group activity"—we have a real opportunity to help people find more effective ways of living. It is in the worship experience that the individual is encouraged and helped to do that which enables him to overcome some of the obstacles in his living. Here he is provided with the means, through such resources as the use of a general confession, to express some of these attitudes which formerly he had to keep hidden even from himself. Here he is reminded, by his own

verbal articulation, of those life-giving strengths which his own problems for the time being had kept obscured from him. Here *in company with others* (and this is perhaps the strongest element of the whole worship experience), he says and does and hears those things which help lessen his own feelings of being unacceptably different from his fellows. Theologically we would say that for estrangement worship offers reconciliation with God.

The roots of this sense of estrangement and isolation lie deep in the soil of guilt and sin. But centuries of experience have guided the Church in dealing with this problem and services of worship, however varied, have been successful in bringing men out of isolation and estrangement from their fellows and from God by freeing them from their burden of guilt. It is true that at times there has been an unhealthy dwelling upon the problems of sin and, at this point, religious leaders have learned to profit from the insights of psychiatry. Although some deep-seated guilts may not be much affected by the processes of group worship, a sense of need can be awakened and the desire to do something about it, in which case a referral to a psychiatrist may be indicated.

Worship, representing the collective endeavor of men to relate themselves effectively to the Most Real, is clearly relevant to the problems of mental hygiene. As Hocking says, "To achieve its cure psychotherapy must organize the affections of the subject about an object which is real; no other object will do the work. The real as the object of affection is what we mean by God." The aim of worship is to bring the worshipper into a thinking and feeling relationship to the Most Real. It follows, then, that effective services of worship, whatever more they may be, are good instruments of group therapy. In the group which is thinking and feeling together about some common idea, the emotional response is heightened and intensified. In the case of Christian worship, music and pageantry, sermon, prayer and response are used to focus the attention of the group upon what is believed to be the Highest Good and the Most Real, manifested in the person of Christ. Twenty centuries witness to the effectiveness of such worship in changing men's lives for the better, in bringing release from guilt and freedom from fear, in giving direction and purpose to their striving, and in lifting them out of neurotic self-concern into a healthful and creative relationship to their fellows.

Men need more than bread to live by; they need an ideal to aspire to, a sense of belonging, a leader to follow. All of these needs are uniquely answered in group worship. The experience of men in concentration camps showed that they broke down more readily when they were isolated or when they had no leader. But when they could feel the support of the group or when they had an ideal leader, they were able to endure indescribable tortures and indignities without breaking. We cannot live unto ourselves and be healthy. We need the support of our fellows, and wise, friendly, understanding acceptance. The child cannot grow successfully

without the help of an understanding adult, and the adult, still growing toward maturity, needs an ideal leader to keep him steadfast by his example, and to encourage his aspirations toward the better in the face of life's everyday experiences as well as in times of "concentration camp terror and trial." Christian worship offers that ideal leader in Jesus and the support of a group which brings together all kinds and conditions of men. It is true that this relationship is sometimes such as to foster an emotional immaturity, forever "leaning on the everlasting arms," but worship at its best presents a challenge to grow, to learn, to get beneath appearances to the deeper truth of things.

Group worship evokes a deep emotional response, associated with a ritual that serves to give dignity and significance to both the commonplace happenings of life and its critical events. All of the service, but especially the sermon when dealing with life situations, can be used to suggest and enforce therapeutically helpful ideas and emotions, made all the stronger for being shared.

The aim of worship is, above all, to awaken men to faith, to enforce and direct that faith, thereby bringing them into a better functioning relationship with the Ultimate Reality. The man who is without faith lacks any organizing center in his life. Like the demoralized Macbeth, he feels that

"Tomorrow, and tomorrow, and tomorrow,
Creeps in this petty pace from day to day,
To the last syllable of recorded time;
And all our yesterdays have lighted fools
The way to dusty death."

Here is the picture of utter meaninglessness. Such a man has nothing to live for, nothing worth fighting for, nothing to give meaning to life or to death.

Across the generations men have found faith through worship; faith in God, faith in themselves, faith in their fellows, faith in their future. Such faith can make a vast difference; it can take men who, in James' words, are "divided, wrong, inferior, and unhappy and make them united, right, superior, and happy." Theology, ritual, and techniques may vary with different religious groups, but they are one in seeking to bring release from guilt and to establish a right relationship with God, with the Ultimate Reality, with the moral and spiritual order.

Worship is not a substitute for counseling and psychotherapy, but it does offer help to the individual in his efforts to achieve integration and emotional stability, and it brings him into a sustaining, stimulating, satisfying relationship with other men. It challenges him to achieve the best that is in him, it offers him an access to the "power not himself that makes for righteousness," it brings meaning into his life and a sense of abiding purpose that even death cannot defeat. As the psychological meanings of religion and worship become clearer, so the opportunities for the use of

well-thought-out prayers, affirmations of faith, scripture readings and responses, and hymns, can result in a more helpful ministry to all who experience difficulties in adjusting to all the realities of our complex modern life. It is just such a ministry that would emphasize the realities of good mental hygiene.

Sacraments and Ordinances: The Church has always held that every sacrament and ordinance has two elements: form and matter. In other words, every Sacrament is a symbol. It is a visible sign of sacred things. Since the advent of the schools of depth psychology, much light has been thrown upon the significance of the symbolic meaning of the Sacraments. This new insight is not without value to the minister who works with individuals in the administration of the Sacraments. In summary, this psychology has said that symbolization is the unconscious process built up on association and similarity where one object comes to stand for another object through some part, quality, or aspect which the two have in common. The essence of symbolization is in the displacement of emotional values from one object to another.

Because of their profound emotional significance, the symbols of the Sacraments are a resource for mental hygiene. Through them the individual is led to examine himself. Each individual must see himself without projection of blame on others. Having weighed himself in the balances and found himself wanting, he is encouraged by the discovery that there are others in the Christian fellowship who are also imperfect, but who are striving with him to work out their problems. Through the Sacraments, symbols of God's love and power available to man, the individual has access to forgiveness for all past acts and a universal love and acceptance for the present and future. Self-examination, forgiveness, love, and acceptance are necessary for healthy emotional development. The Sacraments offer a means to these, for those who can accept.

One of the factors in illness is the evasiveness of the patient. He has been hurt badly in the past, is too fearful, hostile, guilty, and insecure to meet many of the real issues in the present. One of the functions of the Church is to provide the means for people grasping the truth about themselves and their relation to God and to others. The Sacraments can be one of the powerful forces in helping a person meet life rather than run away from it or fight it. Persons trained in mental hygiene chiefly are frequently concerned about the Sacraments being used with a magical emphasis. This is recognized as a danger although, of course, many things besides religious ordinances are used in this way. It is important, however, that the person realize the real meaning of the Sacrament; that he see the relation of his own experience to it in a conscious way, and that he be carefully prepared to receive it so that not only is there the outward expression and sign but also at least the beginnings of the spiritual grace within. In anointing of the sick, for example, the fear of death may be prominent and exploration may reveal grudge and envy and the covering up of hostility

guilt. It is interesting to see in the preparation for anointing that the person, with some guidance, moves from an anxious interpretation of the self to a more positive and wholesome expression, seeing it as a summing up of the goodness of God, the healing forces coming together to help him live well, acceptance of and forgiveness of his sins, and strength to live a more adequate life.

Some of the values are even clearer in the Holy Communion. It is recognized how strong and sometimes devastating are the defenses which cover up the deep dependent desires to be loved and to be cared for. In preparation for the Communion, there is the opportunity to get behind those defenses which consistently keep other people at a distance and make the person remote, uncertain, or a stranger, and to help the person bring out the concerns which he has not shared or confessed before; that is, confession as a condition very often, if not always, needed for a more adequate Communion; one can often get at the heart of the problem in relationship when the Communion is a focus for doing so. In essence, the Communion says, there is nothing hid from God and there is no use trying to cover up ill-will, destructive mistakes or other feelings and acts about which there is guilt and the consequent inevitable retribution of the conscience. In relationship with others, that is in the fellowship, and with God, the power of these hurtful patterns of feeling and behavior can be taken away and underlying sources of love can find more active expression. We want to know, therefore, what are the concerns of the patient and what Communion means to him, as well as taking into account the objective meaning of the Sacrament. As the Episcopal Prayer Book says, "For, as the benefit is great if with a true penitent heart and lively faith we receive that holy Sacrament, so is the danger great if we receive the same unworthily."

As with everything, the more one gives to it, the more meaning the experience has. In preparation for the Sacraments and ordinances of the church, the individual is doing the preparatory work which places him in the best position to receive the full values of the Sacrament both as signs of the fellowship and as expression of the acceptance and the love of God. When this is not an automatic act and not invested with large amounts of neurotic feeling, but is a consciously chosen act to receive something good from someone else, it is an act which can symbolize the whole giving and receiving relationship which is basic in counseling, in family life, in worship.

Preaching: Many things have been said about the effect of preaching as an agency for improving relations between men and governments. There is no attempt here to minimize the obvious beneficial results that have followed the message of the pulpit throughout the centuries. There is, however, a growing awareness that the hatred that breeds war, and the emotional upheavals that lead to mental illness and antisocial behavior, remain a grave problem and this problem persists in spite of churches and preaching.

In view of the present world situation, one is led to consider the oppor-

tunity of the minister through preaching. Since the minister's work is with people, he should have a thorough understanding of the dynamics of personality and give due consideration to the reason men act as they do. It is generally admitted that men today react with insecurity, anxiety, fear, and hatred. Yet some preaching today arouses basic hostilities and conflicts in a way that is destructive of both personal and social good. Much of it is designed to arouse responses of fear in the minds of people who have been conditioned to be afraid from the time of babyhood. It seems obvious that we cannot overcome hatred with hatred or fear with fear, nor is this the Gospel.

Much of the preaching of the past has been occupied with theological interpretation; yet our ideas about God depend upon our growth toward emotional maturity. When personality is distorted, there is a tendency to devise a theology suited to neurotic needs. Effective preaching must grow out of an understanding of personality with an adaptation to personality needs and an application of a simple theology that interprets for one the meaning of life and gives one security in his relations to God and man. Effective preaching must have in it the kind of therapy needed for people who are to some degree ill emotionally. When people are wrestling with inner conflicts and tensions they need sermons that will bring their conflicts into the open. Sermons that deal with life and the solution of life's problems are always helpful. When there is so much bitterness and hatred in the world there should be an awareness of these emotions and an attempt to rid ourselves of aggressions in a socially acceptable way. So much of the preaching in the past has been of a repressive nature, with the effect that emotions have been crowded down. Some of the results of such preaching are inward turmoil and conflicts and sometimes sudden eruptions both in distorted personalities and in group violence. An emphasis upon the Christian doctrine of love and the positive values of religion should offer freedom from frustration and give security to those undergoing the strain of modern life.

"If the minister would spend less time preaching moralisms and more time in trying to energize personalities, the Church and its people would be much better off." This statement, made by a fellow minister, has great meaning for those of us who have been working as institutional chaplains and have come to know some of the needs of individuals. Moralizing is practically a useless procedure in attempting to help people. It is not good mental hygiene since it conveys a sense of condemnation rather than the feeling of understanding, which apparently Jesus felt was necessary in his ministry to those in need. Jesus stressed the importance of life, the joyful and abundant life. There is much evidence that the Church has often deviated from this basic Christian principle which is compatible with good mental health, and has become a repressive agency which is life-negating rather than life-affirming. The minister in his preaching often has spent too much time preaching about moral problems in a repressive, life-

gating, condemning, and mechanical manner to the extent that he has impered life, instead of helping to energize personalities to live abundantly.

Preaching can be compared with group therapy. The minister preaches to a group in which the needs are many and varied. If the minister is active in parish work or has an opportunity to talk with his parishioners and has some insight into their needs, he can use his sermons to treat these needs. Some common problems found in all communities are alcoholism, spiritual difficulty and divorce, sex delinquency, behavior disorders and psychopathic behavior, and mental illness. If the minister through his preaching can give his people the feeling that he understands their problems, that they can confide in him, and that possibly he can be of help to them, he will be sought out for personal counseling. If their needs are not too great, the sermon itself will be of benefit.

There are many needs which are common to all people, regardless of their race, creed, life adjustment, or status of mental health. All people need to be loved, to have some others with whom they can share their love, to be accepted, to have a feeling of achievement, and to belong to something constructive and worthwhile. By good preaching the minister is helpful in fulfilling these needs. Firstly, he can preach on the value of affirmation of faith, emphasizing the positive and dependable factors of the Church and religion. Secondly, he can stress the value of fellowship in combating the feeling of loneliness and isolation. Thirdly, he can help the people to know a God who is loving, merciful, and forgiving. Fourthly, he can help his parishioners to grow into a mature concept of God and to accept mature attitudes toward religion, instead of retaining their childhood attitudes and concepts. And fifthly, he can help them to live more abundantly by helping them to feel and to realize the difference between a life lived on a compulsive, fearful, submissive, rigid, dishonest, selfish, condemning, dependent, and immature level and a life lived on a spontaneous, independent, joyful, honest, unselfish, loving, understanding, cooperative, and mature level.

It is also necessary that the minister demonstrate in his preaching faith, love, understanding, power, and good health in such a positive way that the people not only hear what he says but also *feel* what he means. Preaching thus is not the compilation of words and ideas but the transmission of feelings. It is not merely thought-provoking but it energizes personalities. It is vital!

The minister in his preaching can influence his people to *live*. Of course, it is necessary for the minister to be healthy and relatively free from personal anxiety if he is attempting to lead people toward good health.

Religious Education: In its program of religious education, the Church has a unique opportunity. From the age of three or four until they reach middle adolescence, most children from Christian homes come to the Church for at least one hour a week in Sunday School. While this is not much time

for the teaching of religious knowledge, it is considerable time for the development of emotional and spiritual health. (Most mental hygiene clinics would like to have a comparable amount of time to spend with their clients). Unfortunately, the Churches have tried to use this time to cram religious facts into the brains of their children, forgetting that religion is much more a matter of feelings and attitudes than it is of knowledge. "Thou shalt *love* the Lord thy God with all thy *heart*, with all thy *soul*, with all thy *strength*, and with all thy *mind* . . . Thou shalt *love* thy neighbor as thyself." In these words the founder of the Christian religion summed up the entire "law and the prophets." In contrast to the usual parish program of religious education, an improved program taking into account our present understanding of mental hygiene, might include, for example, some of the following emphases:

(1) The personal health (emotional and spiritual) of those who direct and teach the Church's children will be more important than their knowledge of the Bible or of church history. Church school teachers should be chosen because they are capable of giving their children love and understanding and acceptance, and freedom to explore life's meaning and to discover the truth, the beauty, and the goodness of the Christian religion for themselves. They should not be chosen for their ability to maintain peace and order during the class period or their skill in preparing their youngsters to pass a test in the memorization of the catechism or the books of the Bible. Through the giving of love and by their example more than their precept, healthy, mature Christian leaders of children can do much in these years of Sunday School attendance to encourage healthy maturation in the Church's children—and to give the Church a crop of strong, thoughtful and charitable leaders in the next generation.

(2) The religious education of the future should be more concerned with expression than with impression. Basic religious feelings are natural in children—so are profound religious questions. Perhaps it is because the adults around them have really been afraid to deal with these feelings and questions that religious education has been so concerned with the transmission of a given mode of approaching the religious aspects of life and a given set of facts about religion. Adults in the Church could learn a great deal about religion from the Church's children. Why not give them a chance? Give them an opportunity to bring into the open all of their questions. Encourage them to tell us some of their answers. Let them express their deepest ideas and feelings in ways appropriate for them: in discussion, in all the forms of artistic expression, in words, in their own original prayers and liturgies. What they develop from this approach to religion will at least be their own and will easily and steadily undergo change and growth as they increase in experience and understanding. This does not imply that tradition must be entirely neglected, but that its use must be functional and critical, not rigid and authoritarian. With this type of religious education children will be helped to the kind of understanding of

themselves, their fellows, their universe, and the Creator of all which is the essence of mental health.

A significant recent development in the religious education program of the Church is its increased emphasis upon work among young adults. It is felt that the emotional and spiritual growth of the child can most effectively be influenced by working with the parents while the child is still very young. More is said about this trend in the next section of this report.

Group Activities in the Church: Most local Churches have among their organizations men's clubs, women's groups and business and professional groups. The provision of fellowship and of channels for the sublimation of instinctual energies which these groups offer are important. But also important are the opportunities to present to these groups some understanding of the mental hygiene problems which have a bearing upon their lives. For the business and professional groups (mostly unmarried) some discussion of dating, courtship, and marriage, under the direction of someone competent to lead such discussion, should be helpful. Problems of adjustment to work and to work associates could also be discussed with great profit in such a group. In groups of older men and women there are a number of mental health problems in which there is a real concern. Attitudes toward children as they pass through their stages of growth, attitudes toward the problems of adolescents (particularly their feelings of ambivalence toward adults and their experiments in love-making and social and vocational life), attitudes toward the marriage of their children, the problems presented by "change of life," retirement, and old-age—in all of these matters an opportunity for guidance and direction could be of inestimable value for the mental health of our communities. And in all of the above groups there is much help to be given through guidance in the field of recreation and hobbies, and the whole matter of participation in the larger social life of the community, the nation, and the world.

Most significant are the modern trends in the Church's work with young married couples and with adolescents. Probably the point at which the Church can exercise its most helpful influence is among young married couples—and we are increasingly exploiting this, as can be seen in the remarkable growth of couples' clubs in the past ten years.

The young adults are the ones who are asking questions about marriage, sexual harmony, and the training of children. The contemporary popularity of "psychology" has sharpened their interest in these very problems. There has been a remarkable response wherever the Church has made the attempt to help them find the answers to their questions. These young parents meet to discuss their common problems. They invite psychologists, psychiatrists, social workers, obstetricians, and pediatricians to speak to them. They are eager to find out how their lives together can be made happier and more useful and what they can do to raise a generation of children healthier and happier than their own. If the

Church does not make this sort of thing possible, there will be no other agency in most communities large enough or influential enough to help these young people find the answers to their problems. The fact is that every Church today that is really ministering to the needs of its people provides such an opportunity. Some Churches, of course, go even farther than this and incorporate as part of their facilities counseling and psychiatric clinics.

Practically every Church also has at least one youth group—usually made up of adolescents. Parents and educators agree that this age group is one of the most difficult to deal with, and the Church has found that to be true, too. When the boy or girl becomes physically mature, he or she is ready to break away from the family. This is usually impossible in our society. The result is frustration and considerable aggression towards parental authority which so often continues to regard the adolescent as a little child. These feelings of the growing person are readily transferred to (or perhaps we should say against) the Church. Modern youth workers within the Church take this into account. We clergymen have found that if we can understand that transference and the motivations behind the original feeling, we can deal with the problem more satisfactorily than the confused parents. Under proper guidance available in the trained clergyman, the adolescent can be brought to a better understanding of his parents, himself, and the forces at work in each. We have found that during this period, adjustment is best achieved when we exercise a minimum amount of authority and at the same time work towards the acceptance of self, and an increased assumption of responsibility on the part of the adolescent.

To be specific, the Church can make it possible for its adolescents to acquire healthy mental attitudes toward such sexual functions as masturbation, nocturnal emission, and menstruation, especially where these are not adequately dealt with by the school and home. This can be accomplished in groups by qualified physicians or in pastoral counseling with individuals. Considerable understanding of the problems involved in courtship, "dating," and other relationships with the opposite sex, such as social amenities, dancing, smoking, drinking, and love-making can be given through informal discussion, provision for parties and dancing, and personal counseling. These young people need help, too, in the choice of vocation and the educational prerequisites to vocational success. Especially needed here is encouragement to think seriously about what they want and can do vocationally, as well as knowledge of what colleges provide for free realistic thinking and acting, both academically and socially. These youth groups also give the Church an opportunity to deal with the problems of preparation for marriage, including the choice of a partner, the use of contraceptives, and attitudes toward children and in-laws. In the larger social sphere, the Church can bring to these young people a greater understanding of peoples of other racial, cultural, and religious backgrounds

and can prepare them for participation in the life of the community, the nation, and the world. In this there would be discussions of common problems of the moment, along with attempts to understand what underlies prejudice and provincialism.

Church Social Agencies. In addition to the many activities that touch the lives of people in connection with congregations, Churches have engaged in many health and welfare activities. The listing of them would include hospitals and convalescent homes, homes for the aged, child-care both in institutions and under foster-care, social case work for adolescents and for families, group work in camps and settlement houses, maternity homes, hostels for seamen, and some marriage counseling centers, and mental hygiene clinics. Still other social work is done not directly in church agencies but under Church auspices in cooperation with community agencies, e.g., referral services for community agencies and chaplaincies in public hospitals and in some courts. In all of these activities Protestant Churches come into close association with the mental hygiene movement.

The largest part of this work is of a character like that of other social agencies in any given community. The programs and types of organization of work seem to be determined more geographically than ecclesiastically. The reason for this is that in large part both the Church agencies and the others have been started and sustained by the same people. The history of social agencies shows that a large number of them started out for the special interests of Church groups who were the first to sense certain human needs; later the general community has come to recognize the importance of the work and its auspices has changed to that of the general community, still including many of those who represent the original religious concern of the founders. There is therefore a common history for both Church social agencies and others; both grow out of a sense of certain human needs and the humanitarian desire to meet the needs, and both have gradually been informed increasingly by the disciplines of sociology and psychiatric psychology.

The principles of mental hygiene have been so in the air during the last quarter century that what in any event is a frequent question in every agency, how to improve the program of service and its organization, has been taken to mean improvement in the quality of human relations in the camp, the home, the hospital or between worker and client. It is realized everywhere that service does go beyond the provision of food, shelter, and clothing. The question of setting standards of work is now regularly considered as a question of what the current practices do to people. This Christian concern is much aided by the formulations of mental hygiene principles.

In the past it was sometimes thought that what chiefly was needed in addition to food, shelter, and clothing was "religion". Some Church agencies for this reason avoided the religious questions of high standards, trained personnel, adequate salaries, and wage remuneration, even of adequate pro-

vision for the basic necessities for those served. There was an attempt to compensate for improvement in the quality of work by boasting of religious auspices and of some religious observances. Then in reaction to this many Church agencies today turn their attention to better quality of service on only humanitarian grounds; often they then become so indistinguishable from other humanitarian programs that the only thing they ever say about religion is that they do not proselytize—this seems a singularly negative philosophy.

Some synthesis of this thesis and its antithesis is now making its appearance. Statements have long been made of the basis of humanitarian work in terms of Christian principles—for example, the religious roots of the principle of personal worth, of self-fulfillment in the community. Now in addition there is an attempt to show the relationship of principles of mental hygiene to principles of Christian belief, for example, to state the place of “acceptance” in “forgiveness”, the relationship of “non-judgmental” work to necessary judgments of value, the place of non-directive therapy in the setting of religious authority, and the relation of tolerance to convictions of principle.

Selection of Candidates for the Ministry. Many examinations for entrance to the professions, including that of the ministry, place the emphasis on gross physical health or intellectual capacity. There is often little consideration of physical symptoms which are associated with disturbed feelings or with the applicant's distress in his inter-personal relationships. It would seem particularly important for the Church to know the quality of the applicant's inter-personal relationships, his emotional stability, spiritual maturity, and capacity for growth and understanding, since a large part of his responsibility is in this area.

In one Church, 20% of the disability grants of clergy are for emotional reasons and since many of the ordinary problems of the clergy have their origin in emotional distress: such as lessened capacity for work, intra-congregational conflict, poor relation to authority, superficial pastoral care, “feeling in a rut”, critical and chronic physical symptoms, sense of “not getting anywhere” critical and judgmental attitudes toward the parishioner in trouble, or evasive prudishness regarding matters of the sexual relationship and marriage: it would seem worthwhile to examine applicants more carefully in a way which would help one make some estimate of their capacities for inter-personal relationships. In addition to a physical examination which takes into account emotional elements in physical complaint, it would be helpful to have a psychiatric interview, an objective psychological test, and an interview with a clergyman with some understanding of the relationship of the deeper feelings to the professional religious adjustment.

Often what is needed is an examination that emphasizes not gross physical or mental pathology, but the ordinary functional expressions of being in trouble. Some considerations which might be helpful are:

- (1) Are you subject to moodiness, depression of spirits, or irritability?

- (2) Do you have fears of being in the company of people, or do you have any trouble at all in mixing with other people?
- (3) Do you develop symptoms relative to the heart, stomach, bowel, or bladder when under emotional distress?
- (4) Are you preoccupied with concern over your health, and do you have need to consult a physician frequently for reassurance?
- (5) Are you troubled with bad dreams?
- (6) Do you have difficulty sleeping?
- (7) Are you sensitive to what people think about you, and do you ever feel that they may be talking about you and saying unfavorable things about you?

course when a Rorschach Test or some similar examination of emotional capacity is used, and an interview with a psychiatrist is held, the need for these questions in the outline is eliminated.

Perhaps it would be useful, in addition to the physical and psychological examinations, to have also a religious history. Occasionally the church is a refuge to students running away from serious family problems; it may give an opportunity to the man with considerable pent-up aggression to express power over other people; or it may involve an expression of childish need to be dependent and to be cared for (assuming a minimum responsibility and projecting the remainder upon God); or it is possible for the schizophrenic to feel a great gulf between religion and the ordinary things of everyday life, so adding to confusion, guilt, and anxiety rather than relieving it. The Church is also occasionally a haven for the unconsciously driven person who is concerned chiefly with numbers, quantity, and money. These tendencies need not necessarily keep a man out of the postulancy, but it would be helpful if the examinations made the tendency clear so that throughout the seminary and diaconate experience the man could be helped to meet the problems courageously and to use his understanding of himself to help other people rather than working out unconsciously on them his own feelings.

Physical, psychological, and religious history outlines probably also should include some consideration of the emotional factors, and give some actual basis for judgment as to the quality of the student's relationships with other people and with God. Many men who are within the limits of acceptance for the postulancy have serious personal concerns and need assistance with their problems.

There is some evidence to warrant the impression that a great deal of professional unhappiness and insecurity is present because the clergyman has never had an opportunity to work out his own emotional conflicts with a counselor in seminary or early in his ministry. Adequate attention to these things in the postulant examinations might be the first step toward giving them more attention throughout the training and working life of the clergyman. If these things are not taken into account, it makes very difficult to fulfill the ordination promise to be a wholesome example

and to have a wholesome family life. As a physician recently pointed out, the clergyman, by his very choice of work, does need to be more patient with his wife, more kindly to his children, more honest with his finances, more understanding of the anxious and guilty and sinful, more outgoing, warm, friendly, responsible, and happy.

Examinations in the medical tradition, and sometimes in the religious, emphasize what is wrong rather than what is right. Somehow attention needs to be given also to the positive elements as well as to the presence or absence of emotional and physical disability. Such matters as the applicant's personality strengths, likability, maturity, and cooperativeness are important: whether or not he is natural, spontaneous, flexible, democratic, relaxed, straightforward, and cheerful is of concern to the church; what is the scientific nature of his religious feelings, observances, and conflicts is another question; the determination of his degree of integration, dependability, and understanding, as well as the degree to which there is affectation, selfishness, evasiveness, condescension, or inferiority. Some exploration also from the point of view of motives, life purposes, values, and ethical standards (matters with which the clergyman is professionally concerned) might well be gone into as part of the religious history of the applicant.

Training of Candidates for the Ministry. In a recent history of pastoral care sixty pages are devoted to the centuries from our Lord to 1900 and two hundred pages to the last forty years. This astonishing lack of proportion comes, not from any disregard for the pastoral ministry, but from the fact that it had earlier only slight or occasional descriptions. In our century, through the development of the sciences of human nature, especially cultural anthropology and psychology, pastoral care has for the first time become describable. We may not know better, say, than Jeremy Taylor, but we know more—and we can say what we know.

And new ways of training in other professional fields have set us an example. Medicine has developed internships; social work has developed supervised case work training; psychiatry didactic and controlled analysis. The art of ministering is no longer left to "native talent", but that talent is disciplined to grow unprejudiced and mature. Pastors may be born, we think, but certainly they must also be taught.

The stated aim now in theological education is to train men, not just to teach Bible, doctrine, etc. The latter cannot be slighted, but it is geared into the former. Intellectually this involves much correlation of theology with new scientific data, at once to state the Faith in modern terms and to criticise the new thought-forms lest they alter or minimize the Faith. And constantly the student is helped to make the Faith and its intellectual expressions his own, so that he really knows it and not by rote memory.

On the practical side, to train men is to correlate theory and practice. Field work, both summer positions and work during the term increasingly changes its purpose from earning to learning. Through faculty direction

choice of available work and through supervision, field work becomes education, and not just "experience". But also programs have had to be arranged, such as "clinical training" to provide genuine acquaintance with human problems in hospitals and correctional institutions. The future must see such training in pastoral counseling also within the parish setting, and in addition it must develop training in group work and group therapy. Already course work is modified to take up the gap between theory and practice. Many theological schools have staff members trained in counseling to whom students may turn for consultation or for referral elsewhere to help them resolve personal conflicts and overcome emotional blind-spots.

While beginnings in all of this study can be made on the undergraduate level, most of it requires further post-ordination training, such as by seminars in connection with actual pastoral work in the parish and by graduate study. After all, when the student completes his three years in the seminary, he is still, even when ordained, only a bachelor of divinity.

Pastoral Counseling with pre and early adolescents at time of Confirmation or acceptance of Church membership. Confirmation or acceptance of Church membership, if it is sincere and meaningful, must be based on the emotional reality of love in the young person's life. Basic in all vows of Church membership is an avowal of love for God, for one's fellowmen and for one's self. For such an all-inclusive affection to dominate a person's feeling toward life, a remarkable degree of mental healthiness is necessary. This fact may be overlooked by a large number of clergymen, due to their lack of training in understanding personal relations. Nevertheless, it implies that they should be able to make an evaluation of the mental health of each candidate for Church membership. If they would or could make such an evaluation, a great deal of incipient mental distress could be brought to light and alleviated by the Church and, through referral, by its therapeutic resources in the community.

For example, the pastor trained in the principles of mental hygiene would acquaint himself with the young candidate's relationships to his mother, father, siblings, playmates, and teachers. He would be aware of the child's attitudes toward him and the teachings and practices of the Church. He would learn of the young person's feelings toward himself. In doing so, he would uncover any symptoms of distress, such as extremes of submissiveness or rebelliousness towards authority, of shyness toward the opposite sex, of guilt over masturbation, of substitution, of daydreaming for social activity, of listlessness, and fatigue. The pastor himself could help to offset these unhealthy attitudes by being, as a representative of supreme authority, affectionate, accepting, and appreciative of the child's personal worth. Where misinformation regarding sex existed, he could provide healthy facts and attitudes. When he saw that a highly trained therapist was necessary and available, he could make a referral. In short, the trained pastor would use every possible means to rid the candidate of the negative, unhealthy feelings which make it impossible to know the

true meaning of love. He would know that without such preventative and curative measures the new member would have an equally unhealthy faith.

There is no formula for this type of counseling. This task is a matter of feeling and requires sensitiveness to needs, felt and unfelt. In general the adolescent is frank, natural, and honest and he will find security in the adult who can accept him as a person and who will deal with his questions in a frank, natural, and honest way. He searches for a free, full life with a chance to learn independence and self-realization. He feels the need to develop emotionally as well as physically, and socially as well as religiously. There is no average adolescent. There is the seclusive adolescent and the aggressive adolescent and all degrees between. Provide for him an atmosphere of frankness, honesty and naturalness, and, generally speaking, the detrimental restrictive forces will give away to a freedom and a security which will enable him to work out his own salvation according to God's plan. Rejection and condemnation would contribute to the development of a seclusive or destructive adult. Love and acceptance will tend to mold a useful citizen.

In preparing candidates for Church membership the clergyman functions as an educator as well as counselor. In carrying out his responsibility to teach the beliefs and practices of his Church, a trained pastor will not give interpretations which are contrary to sound mental hygiene. In keeping with the spirit of Christ, he will not "destroy the Law or the prophets" but will give them a positive spiritual meaning, rather than a negative legalistic emphasis which "kills the spirit". In other words, the values which sound mental hygiene promotes are the same values propounded by the best spirits of the Christian Church, namely, the supreme worth of the individual, the supremacy of mutual affection and responsibility in human relations, and a positive, unified Weltanschauung. The adequately trained pastor should be mentally healthy enough himself, to distinguish between the essentially positive spiritual values and those negative, harmful values which militate against the best in human life and the Christian faith.

Pre-marital Counseling. "Chaplain, I am going home in the morning and I just wanted to drop in and tell you good-bye." With this introduction a very attractive young girl came into my office. I had talked with her on several occasions previously when she was quite psychotic, and now she was feeling well enough to leave after being in the hospital for about three months with a postpartum psychosis. She had been a WAVE, married a Marine, come home to live with her parents, and delivered her child after she had been married six months. She had impressed me as being a flirt and as one "who knew all the answers." When she had sat down, I commented that she, no doubt, would be glad to get home again. She answered, "Well, you would think that I would be glad to go home, but actually I'm afraid." She went on to say that her husband was being discharged and she was afraid to live with him. During this interview and in subsequent interviews after she had left the hospital, it developed that she was ex-

emely naive. She felt that any sexual manifestation was perverse; she had no idea what "proper" sex play meant, nor the "proper" manner of sexual intercourse. She was a flirt, somewhat hysterical, narcissistic, and used to keep a number of men dangling at her finger-tips as long as the relationship called for nothing personal. She was in no way prepared for marital relationship.

One evening a young man called and stated that he must see me that evening if possible. When he came later that evening, he brought his wife with him. They informed me that they had been married for about three years and that they had agreed that divorce was the only solution to their problem, yet neither really wanted a divorce. The husband complained that the wife was irritable and excitable, and the wife felt that the husband was preoccupied with sex since they had had intercourse every night since their marriage. The husband explained that this was necessary before he could go to sleep, and the wife stated that she had never experienced any pleasure from this relationship, rather it made her more irritable than ever and also caused her to feel continual resentment toward her husband. The husband felt that it was not natural for a woman to have pleasure or climax from the sexual relationship.

These and many other examples point to the ignorance and misinformation with which couples enter into marriage. Also it points out very clearly the need for marital preparation and premarital counseling.

Who should give pre-marital counsel? Both the physician and the minister should talk with couples planning to marry. The physician is the logical person to instruct young people on the physical and biological aspects of marriage. Often the physician's advice is somewhat meaningless because these young people cannot use the information they have received. The reason for this is that they do not have a healthy attitude toward sex and marriage.

Whatever else marriage means, it means also that two people are going to live together on an intimate basis. If they are not sexually compatible and healthy, living together is going to be difficult. Since there is more taboo regarding sexual matters and since the Church has done much to strengthen this taboo, the attitude of the minister, who represents the Church and its inhibitions (and the super-ego of society to a large extent), is of extreme importance. His attitudes and counsel to the couple contemplating marriage are more important than the physician's or anyone's else. This places the minister in a position of prime importance. Unfortunately, the minister has not always used his position in the interest of good mental health.

What is marriage? Marriage is not a matter of legal certification, marriage is not a matter of the Church's sanction or ceremony; marriage is a matter of two souls being joined together in love. This the State cannot legislate nor the Church supply. The State by means of a marriage license recognizes that the marriage is legal; the Church gives its blessing

to the marriage. In both cases the Church and the State lend their support to a marriage *after* it has been formed. The minister in his pre-marital counseling should make sure that there is a marriage for the Church to bless; if there is any question about the marriage already existing, the minister should refuse to perform the ceremony, at least for the time being.

It is important for the minister to realize that most people desire to get married so that they will have a legal sexual partner and so that they can have someone to love them, rather than having someone with whom they can share their love. One very important factor is for the minister to help the couple to feel that a healthy sexual relationship is the highest expression of love, a relationship where each can surrender to the other with the utmost feeling of warmth, trust, understanding, tenderness, and love. In addition, the minister should be able to differentiate between a pornographic sex life and a healthy one.

In the foregoing paragraphs we have dwelt almost entirely with the subject of sex in relation to pre-marital counseling. We have done so because it is the uppermost concern of those planning to be married just as it presents the basic problem for those who are married and are having difficulty in getting along. A person who is sexually healthy is able to love, to share, and has a sense of well-being, and, therefore, can be Christian. A person who is unhealthy sexually is resentful, cynical, hostile, and narcissistic, and, therefore, un-Christian. For this reason the minister should be very much interested in people being sexually healthy and should deal with this subject in his pre-marital counseling.

Pastoral Counseling with parents in preparation for Baptism. Most parents want their children to be baptized; in some Churches this is a must. This affords the minister with an opportunity for talking with both parents concerning the upbringing of their child. The minister can talk strictly in terms of the spiritual upbringing or he can talk in more general terms and touch upon many other areas of life. The Church for far too long a time has concerned itself with matters pertaining strictly to religion. The Church and minister should be vitally interested in any area of life which affects his present or future parishioners. The minister in preparing the parents for the Baptism of their child should insist upon discussing matters concerning the total life situation of the family. The reasons for this will be made clear in the following paragraphs.

The Scriptures tell us that "we love because God first loved us." This implies that we first received love before we could love others. In a very real sense, a child must be loved before he can share his love with others. Let us make a substitution in the Scriptural passage (and it is justified) and read, "we love because our parents first loved us." It has been demonstrated over and over again that a child who has not had the love of his parents does not know love, and therefore, cannot act in a loving manner towards others. If an individual cannot love a baby, with its softness and tenderness, it is doubtful if he is capable of loving anything or anybody.

The Church teaches about a God who is understanding, loving, merciful, and forgiving. Unfortunately, many parents fall short in representing God to their children. It is a well-known fact that the God we know as an adult is to a large extent dependent upon the manner in which God is demonstrated to us through our parents.

At the time of Baptism it is important for the parents to fully realize that they are responsible for the upbringing of this child to the best of their ability. Most parents want to do just this, but in reality they do not know what is best for the child. First, they must realize that the baby is a human being and not a mere mechanical unit. For about the first year and a half of the child's life he is entirely dependent upon the mother for his needs. This is the most critical and important time of the child's life; therefore, much thought and preparation should be given to it. It should not be dismissed with the thought that the child is so young that things are not important at this early age; the exact opposite is true. If the mother can give the child the feeling that she genuinely loves him by perceiving him, and making it possible for him to receive warmth and affection, to receive oral gratification, and to experience life as pleasurable and friendly, the child will be on the road to happiness. By the same token the child will be able to become a Christian.

If, on the other hand, the child is resented by the parents, is not fed when he is hungry but only on a predetermined schedule (predetermined by the parent and not by the child), is not permitted to experience the pleasure of living, and is frustrated at every turn, the child will become resentful, maladjusted, and will be un-Christian.

Let us present some examples. Tommy is a child who is now two years of age, and I have seen him frequently during this time. He was a lovable, well-behaved, outgoing, and happy baby. His parents have resented his coming from the day he was born (probably before also). Both parents are narcissistic, cynical, and unhappy. This child has not received affection, security, nor understanding. I have seen him become progressively withdrawn and unhappy. He was fed precisely on schedule and often would cry long before feeding time because he was hungry. His parents have put him to bed at "bedtime" and let him cry himself to sleep. They have not let him become "spoiled" by not picking him up when he cried (they have ruined him rather than spoiled him). He was toilet trained at nine months, a fact which made his mother happy. He has much trouble with constipation. He is afraid to take the initiative to do anything since he has frequently been punished for this and he is no longer outgoing and does not trust people. In brief, he is unhappy and is not living in a friendly world.

I feel that it is safe to predict that unless the life situation of this child changes drastically in the near future he will have difficulty with the children at school, will have difficulty in making a happy marital adjustment, and certainly would not be an asset, by precept or example, to any

Church fellowship. He has not known love, therefore he cannot show love.

Another example is that of an eighteen month old girl. One evening her parents took her along to a dinner at the home of some friends. Dinner was served much later than was planned, so the baby had eaten, and now she was getting sleepy. While the adults were eating, the girl was getting sleepy and fussy and walked from one to the other around the table. As she was passing the chair of the host, he picked her up and she sat on his lap. Within a minute she wanted to get down, but he held her securely. She continued to squirm, but he tightened his grip as if to say "I'll hold you regardless." When she felt his grip tighten, a look of perplexity came over her face. She could not understand why some one was acting cruelly toward her. She had not experienced this before. The expression of perplexity changed to that of fear, her lip dropped and she burst into tears. Of course the host had no idea what this meant to the child and would be greatly apologetic if he understood its significance. But it had deep meaning for the child: an expression of cruelty, lack of trust and faith. Is it little wonder that children who have *many* experiences of this nature find themselves unable to love, to trust, and to have faith?

The Church is at a disadvantage when the home fails! The minister can preach about love, for instance, until he is blue in the face, but unless his congregation has experienced love, they cannot know what he is talking about. It is doubly sad if the minister does not know either!

It is more true than most people realize that there are many hypocrites in the Christian churches today. Most adults have not been reared in homes where the parents have realized the significance of love, security, understanding, and happiness. As a result they have become resentful. But as adults they must learn to live in a society and conform to its moralistic patterns. In order to turn their anti-social tendencies into acceptable behavior, they have, of necessity, developed many reaction formations. They join a church and act in a loving manner, act unselfishly, act happy etc. But basically they do not feel that way. They live compulsively and become Pharisees. Actually they are hypocrites. They live a reactive love instead of basic, genuine love, for example.

In the contemporary churches the idea is prevalent that sin is synonymous with pleasure. One who does not experience life pleasantly will become resentful and selfish. One of the basic tenets of the Christian religion is that of love. But if the Church becomes a repressive agent and denies its people the privilege of experiencing life pleasurably, the people will become resentful. In doing this the Church has achieved the goal which is opposite from that which it is trying to achieve.

The minister at the time of preparation of Baptism should stress the value of Christian homes. Christian homes is the world's greatest need today. It is in the home that the child first learns of love and kindness. A Christian home is a Christian world in miniature. The family is a model for a world society wherein men may live together as brothers. If at home

learn to live together as members of one family, each serving the common good, we shall be prepared in understanding and attitude to live as others in the larger spheres of the world. The alternative to this is clear.

It has been said, "As the home serves the individual, so the Church serves the world." The home should instill and nurture Christian ideals of love, kindness, tolerance, and understanding in the child, and the parents must not only teach this to their children, they must also serve as the living example. Likewise, the Church nurtures, preserves, and develops these ideals in the hearts and minds of men who comprise the world society. Let us stress again; the Church is at a distinct disadvantage when the home fails. The minister must be interested in the upbringing of children and must stress its importance to parents preparing to have their children baptized.

Pastoral Counseling in time of illness or emotional stress. "The Spirit of the Lord is upon me because he hath sent me to heal the broken-hearted, to preach deliverance to the captive, and recovering of sight to the blind, to set at liberty them that are bruised." These words from Isaiah, which were applied to himself, apply likewise to the minister who is his recognized representative. Here is a vivid description of the estate of the sick, the neurotic, the broken, the unhappy to whom the minister, by right of calling, must go, or who seek him out for help in illness or emotional distress. They are the broken-hearted, broken by conflict, captive to fear and guilt, blind to the real causes of their trouble and desperately needing help, bruised by their own unavailing and fruitless efforts to be free.

The pastor stands in a unique position in time of illness or emotional crisis. When his service is needed for counsel, this service cannot be replaced by representatives from other professions. Any problem of a religious nature should be dealt with by one who has specialized in the field of religion. When one needs to unburden the soul from feelings of guilt, the pastor's presence is desired. In every period of emotional crisis, from birth to death, the pastor should accept the challenge of meeting human needs. Owing to the nature of the work of the ministry in dealing with people, many have native endowments in the field of counseling. It would not be easy to describe the results in personality growth when the clergyman requires some skill in understanding personality and when counseling becomes an important role in their ministry.

Today thousands of people with emotional problems are without help. Psychiatrists are swamped by the demands of their profession. In certain sections of the country people are removed by hundreds of miles from psychiatric help and many would not be able to pay the fees required for professional skill. But if psychiatrists were plentiful and the fees within their limit, vast numbers would prefer the counsel of a clinically trained pastor. The pastor inspires confidence because of his wholesome philosophy of life. When one is confused because of the loss of faith or

because life does not seem worth while, the pastor has an advantage. His faith inspires faith and his emphasis upon a constructive program of life enables the one in need to dispose of self-centeredness by finding an interest in something greater.

In pastoral counseling the minister faces essentially the same problems as the mental hygienist. He has the advantage, however, of being able to deal with the difficulty in its earlier stages and thus to work toward the prevention of a more serious maladjustment. Pastoral visitations furnish an opportunity for his parishioners to talk over their problems with him and many emotional conflicts are brought to light at a time when wise counseling can be used to head off serious mental illness and help the individual to achieve a healthier adjustment.

Unfortunately many ministers limit themselves in certain situations e.g., premarital counseling, to the giving of advice, and in the "cure of souls" resort generally to what may be called "faith healing" methods—prayer or friendly words of suggestion and reassurance often without any attempt to get to the roots of the trouble. While these methods have accomplished a great deal of good they have obvious limitations. And these limitations probably account in large part for Jung's finding that non-Catholics are more likely, in mental suffering, to consult the doctor than the minister. This underlies the need for clinically trained pastors who have a disciplined, skilled understanding of the psychological processes underlying emotional conflicts. The need is widespread and urgent.

Everyone needs an opportunity, from time to time, to unburden himself of things that need airing, to a sympathetic and understanding listener. Secrecy is, of course, a normal part of everyone's life, but if the things associated with fear, anger, guilt, accumulate in the secret places of the soul that secrecy can become destructive. An appreciation of this danger lies back of the ancient wisdom of the confessional. There is a normal need to open one's heart at intervals to an understanding confessor. Such a confessor, whether minister or mental hygienist, stands to the subject "in loco Dei." In the face of this responsibility the thinking pastor will agree that nothing but the best training will do to prepare him for his work in dealing, face to face, with the deepest things of a man's soul.

In emotional crises, obviously in mental illness, less obviously but none the less urgently in organic illness where there is always an emotional component, often as a major factor, the mental and spiritual anguish of the sufferer increases his need to unburden his heart. The minister must deal with these problems. If he has been adequately trained, he is in a position to make an important contribution to the emotional health of his people. But he must know how to listen, how to recognize and follow up leads, what to say and what not to say, when to pray and when not to pray. Otherwise he may do harm rather than good.

The counseling techniques of the trained minister will not differ essentially from those of the psychiatrist, aside from the use of prayer when

ated and a different terminology (e.g., God—reality, salvation—intention), but certain subtle emotional differences may arise from the affect-coloring of words and symbols. This leads to a consideration of the fundamental distinction between the function of the minister and the doctor. Certainly there is an area wherein their work will overlap. Dicks has estimated that perhaps 50 to 75 per cent of the counseling of chaplains and doctors in the general hospital is such that the patient could be helped equally well by either one, for both deal with spiritual problems and both are at restoring the patient to wholeness and health. Generally speaking it may be said that the minister's work in counseling is more on the conscious level. It is not his task to probe into the dynamics of unconscious mental mechanisms, but he should be trained to know when to make a referral to a psychiatrist, and how best to cooperate with the psychiatrist in leading the patient back into more positive and creative attitudes toward

Sometimes there are things that a patient will talk about to the minister but not to the doctor, for various reasons, perhaps because his previous experience has been such that he looks to the minister rather than to the doctor for attuned sympathy and understanding. Whatever the reason, a trained minister will know how to make use of this emotional attitude to help the patient confide more readily in the doctor.

The minister's role in counseling is affected by the fact that for most people he symbolizes the conscience of the community. It has been discovered in psychotherapy with children that removal of irrational super-ego prohibitions is more likely to be successful when the parent, who originally imposed the prohibitions, will cooperate with the therapist in their removal. In the case of adults, the minister may symbolize the original inhibitory authority. He may thus play an important part in freeing the patient from rigid, crippling super-ego prohibitions. Furthermore, as Jung has said, "The patient does not feel himself accepted unless the very self in him is accepted too." If the patient can unburden himself to one who symbolizes the conscience of the community and who accepts the very self in him, it will mean that he need no longer consider himself estranged and isolated from the community. There is much that the minister can do in this light to help the patient "to see himself, his needs, and desires, and community standards in a much more realistic way."

It is probable that both religion and psychiatry, operating in isolation from each other, will continue to overemphasize one or the other aspects of emotional conflict and its solution, while neglecting others. But the minister and the psychiatrist, working in cooperation, respecting each other's functions, willing to learn from one another, can most helpfully fulfill their own functions and contribute most effectively to the mental health problems of the community.

Pastoral Counseling in time of Bereavement. At the time of death the minister is called. Religion may not have been a vital part of an indi-

vidual's life, but when the spark of life is extinguished, the loved ones usually desire the services of a clergyman. When religion has not been an important factor in the life of the deceased, anxiety may be present in those that mourn.

A patient was in the hospital with terminal cancer. He was seen by the chaplain several times but was only mildly interested in religion. A middle-aged daughter visited the father frequently. Several times she saw the chaplain and asked him to call on her father. A few hours before the patient expired the chaplain again visited the patient. The daughter was present too. At this time she remarked that she hoped he was saved. He was comatose at this time. In the prayer that was offered a petition was included that he might rest in Jesus.

The following morning the daughter called and said that her father had expired a few hours after the visit of the chaplain on the previous day. She asked the chaplain to conduct the funeral service. That evening the chaplain called on the daughter. She spoke about important incidents of his life. He had attended Church only occasionally. The time they had been in this city, they had established no active Church connection. She felt that it was a blessing that he had died, as he would not need to suffer any longer. Several times she showed concern about the salvation of his soul, but she had talked to him about an hour before he expired and he had moved his lips. So she hoped that he was saved. At this point the chaplain related the incident of the thief on the Cross, who had accepted Christ.

For the funeral service the brief meditation was entitled, "Where is your hope?" based on 1st Thessalonians 4:13, 14. "But I would not have you to be ignorant, brethren, concerning them which are asleep, that ye sorrow not, even as others which have no hope. But if we believe that Jesus died and rose again, even so them also which sleep in Jesus will God bring with him."

Later the chaplain called in the home again. The daughter talked about her father only briefly; then spoke about early family life. Then she talked about her family, and her present interests.

Bereavement is a time of crisis in the life of an individual. If anxiety is associated with the grief, the minister needs to use added precautions in the counseling. At times the anxiety can be alleviated by combining the word of God with effective personal counseling. The theme of the funeral service should be one of hope—but selected according to the particular needs. In the counseling, the bereaved should be permitted to talk about the departed. Assurance can be valuable if used after the grief-stricken one has been permitted to talk freely. The appropriate scriptures can be effective.

At the International Congress on Mental Health held in London last August, it was emphasized over and over that the family was the basic unit of society and that in it was both the problem and the answer to many of the ills and discontents of our time. The following address, which was given by the Editor at the Annual Meeting of Council for Clinical Training Supervisors in October 1948, suggests

some of the more obvious implications of this fact for the work of the Church. In most communities today, millions of dollars are spent in treating disorder; and perhaps of all the agencies who might guide the community from this penny wise and pound foolish situation, the Church is in the best position. It is concerned with not only changing the trend and adequately preventing the gross tragedies that we experience in modern life, but also in helping families use a little less shabbily, at least, the magnificent resources with which God has endowed them.

THE CHURCH AND THE FAMILY

THE REVEREND ROBERT D. MORRIS

For a year and a half before the International Congress on Mental Health held in London, England, August 1948, Preparatory Commissions over three thousand persons and representing many professions came together in this country and in many other countries working on social concerns of mutual interest to these professions. Then twenty-four men and women from ten different countries and representing as many professions went through the Preparatory Commission reports for three weeks before the Congress convened. The report of this International Preparatory Commission was published during the Congress and provided the basis for many group discussions. The Congress itself had delegates from twenty-four countries, representing medicine, psychiatry, psychology, education, social work and so forth.

Professor Flügel, in summing up the work of the Congress, said that his conclusions might be drawn: (1) that people and social institutions have a great capacity to change, (2) that mental health can be obtained only if many different professions cooperate, (3) that mental health is only possible if a world community is realized, and (4) nevertheless, mental health principles are applicable within many different cultural frameworks. He added, "All too little has been said, however, as to how this could come about."

Over and over, speakers from all countries expressed the conviction that both this problem and the answer to the problem of mental ill health lie in the family. This is a great challenge to the Church, for healthy families are the foundation of the Church, and the Church has always been concerned with providing the means for wholesome family life. As a matter of fact, our religion began with a family. "And they went with haste and found Mary and Joseph, and the babe lying in a manger." Our religion began with a family: the God of love was revealed to us through a family, and it is in the family that man finds heaven or hell, that he saved for a life that is full of grace and truth or for an existence that is full of bitterness and misery. Today we are at a crossroad: either we find new ways to nourish happy wholesome families or we perish. The family is the problem; and the family has the answer. Either we see the family as the basic unit of society, the vital center of the good life, the preserver of health, and give to the family the means for having what it most wants—simple, everyday opportunities for personal and family play and social life, or we will continue to reap the whirlwind of sickness and

disorder that marks the cities of this country. Much physical illness is directly related to unhappy, socially mal-nourished families. How often through no fault of its own the young city family builds not a rich, growing social life, a home that is the heart of healthfulness for outgoing healthfulness of body and spirit of its members; but a poor hovel of sleeping and eating, breeding, and clothing. With little opportunity to know and be known, to feed rightly upon other families in a mutuality of play and learning, and friendship, it feeds upon the children with anxious over-protection and rigid coercive misshaping. Behind barriers of suspicion and distrust and lacking any easily accessible means of social living that will provide for all of the family and for many other families, they become satisfied with cheap substitutes. All they know is work—life is sour and stagnant, there are no lively growing points thrusting their way into the community taking in new experiences and providing constant nourishment for social and spiritual growth. Old friends are forgotten, new ones are not made, old skills, the feeling for play and festival are lost and new ones are not developed. Then, the final chapter of these families is written in the doctor's book, in the notes of psychiatrists, social workers, divorce courts, child guidance clinics. These are people who are conceived by parents in whom no spiritual or biological unity has been experienced, who are born into the nestless nakedness of an unhappy home that knows neither the skills nor resources of wholesome living, and then at last, malnourished, they run away to the confusion of a disordered society to breed again in sickness and social poverty. We raise more money for bigger and better hospitals but we who work in them also need a vision of the cultivation of health and of virtue. We learned from our copy books as children that an ounce of prevention was worth a pound of cure, and then out of the sickness of our society we find we respond chiefly to others in our city when they are at the end of a long journey down the road of pathology.

How to cultivate health: Here is a parable: Once there were 16 boys in a factory district; one of them had a football, and on this October afternoon he said, "Come on fellows, let's go over to the hospital; they've got a swell place to play." So they ran to the high stone wall of the hospital, helped each other over the wall, and lined up on that soft green grass for the kickoff. Just then a burly watchman saw them. "Hey you kids," he yelled, "get out of there fast!" They got out—back to the street—and then in the heat of the game, one of them caught a pass, and as he turned to run toward the goal, dashed into the side of a car. He was cut and bruised and they brought him to the emergency ward of that hospital. There gently and skillfully, the doctor and nurse treated his cuts and bruises. When the doctor was finished he asked the boy, "Wouldn't it be better not to play on the street?" What does it profit a society if it has the best emergency wards in the world and fails to give its youth the means for health?

Sickness is contagious; hate is epidemic, and today we spend in this

country 31 billions that directly or indirectly have to do with war. We find so little on the means for peace, for in the last analysis, the means for peace are in the families. We build bigger and better general and mental hospitals, improve costly correctional institutions, and in the last analysis the way to free the community from sickness and from crime is a new kind of home. Health is contagious too; love too can be epidemic when we have enough parents who know what they really want, and we have enough churches for whom talking of love is secondary to providing a kind of parish home that will cultivate love; when we have learned the laws of wholesome family life and practice them.

Two experiences may suggest the seriousness of this; how much time, effort, enthusiasm we could give to cultivating family health. Some time ago a man, unhappy with his wife, fretful with his children, that they never went out together; there were very few other families to whom they could meet for play and friendship, and then he mused, what difference would it make if a war did come and he was drafted? War, if, a morbid relief from the terrible tension of family ill health! This, I can only understand if one knows that his childhood family life was unhappy that he vowed never to marry.

There was another: A cold, selfish, stubborn daughter who, in her years of married life had demanded much love, appreciation, and companionship, but gave very little. Her life could not be understood until her family was understood. She had learned this from her mother who, by example, taught her that marriage was to be endured, a battle of wills that gave no social or sexual pleasure; and by her need to rule instead of the forged chains around her children that now were difficult to break.

When we are born we have a great capacity for life and for enjoyment. Baptism makes this clear: We are God's; he has accepted us fully, His will for us is to live the rest of our lives according to this beginning. It makes the good nurture of the little ones one of supreme responsibility. We remember how our Lord acted toward the children: Of such is the Kingdom of Heaven; it is better that a millstone be hung about his neck than that he cause one of these little ones to stumble. He took them into his arms and blessed them. And we, parents and godparents promise to give them all things necessary for their soul's health. In the service of baptism we realize that the parents and other Church families are the instruments of God's love to the child; they pass on a good or evil spiritual inheritance. And now we see that the Church cannot rest with telling parents this; it must, in the very nature of its own life, its family life, provide the means for social salvation: social, not in the sense of an occasional aggregation of people on Sunday morning for example, but a mixing of others in mutual action and constancy of friendliness, knowing and being known as a member of a living society; fulfilling and sustaining one's and one's family's life and in this enriching the community. This can be materialized with a coming together of all the family in play, in learn-

ing of new physical and social skills, in the sharing of the knowledge necessary for family health, in worship which is radiant and alive because it is the summing up of daily experiences of Christian family inter-action.

We in the Church must see that the experience of a man and wife playing badminton together may be as important for their souls and for their children as morning prayer; that the food which comes from a growing circle of family friends is as necessary as the food of the Holy Communion. For life takes on its full significance when there is an easily accessible place with the right means where we can learn new ways, can play together, can be with friends, can gain new confidence in social action, coming to move with ease, grace, and good sense in a widening circle of families, feeding one's children out of the abundance of one's social good health. It is up to the Church to provide the kind of social and spiritual soil which will fully nurture the family, rather than leaving it weak, malnourished and disordered. The cultivation of wholeness and of grace, the understanding of family living, and the willingness to admit what every man wants—to become one not only with his own family, but one with all the families, until it can be truly said that in God we are, throughout the world, one great family.

The therapeutic family works together. Recently we have discovered in institutions concerned with illness, that this sense of family is also important in the team of workers who minister to the sick and distressed. It is clear that the spirit in which this is done may be as significant for the recovery as the technical skills involved. This requires, of course, a breakdown of rigid authoritarianism in institutional management and the development of a more easy, natural, and friendly democratic relationship, with appreciation and respect for the contribution of each worker.

Most of what we do and practice in theology and ritual suggests what has just been mentioned. When we say, "Glory be to the Father and to the Son and to the Holy Ghost", are we not placing our experience of the best we know in family as the true picture of the universe: God as the truly good father, children who are one with Him in love and truth, a spirit of tender care and warm affection akin to that of the healthy mother? Why do we sometimes call our clergy 'father' and our fellow Christians 'brothers and sisters', and have for the chief services of the Church expression of our concern for growing up in confirmations, for mating in marriage, for the need for health in the services for the sick; if it is not the realization that our homes are the cells of the body of Christ, and each cell in that body finds its health in good relation to the others. What greater concern does religion have than that these cells move into more abundant growth rather than into apathy or social starvation or illness?

This, fortunately, is not primarily a matter of money; in fact the family disorder which is experienced so often in caring for the sick is frequent in those who have a great deal of money as those who have little. And sometimes good clothes, excellent food, fine houses, or other things

as a substitute for family health. A woman, scarred by an unhappy marriage, said, "My mother and father gave me everything but what I wanted—the sureness that they wanted me, the warmth of love, and confidence that I was and could do something worthwhile. The only times my mother ever expressed love was when I had left home, and then it was on mark cards." Our happiness is bound up inextricably with a happy family, just as the seeds of another war are being sown in the wars fought at breakfast tables, in the bedrooms, and in the nursery.

But the Church cannot just tell people they ought to be happy. Some of all of us must discover what means it takes so that we can feed our children, in body and in spirit, on the ways of peace and wholeness. For parents know that by the quality of our living we create heaven or hell for our children. Is this too strong? Then look at the small boy after a pleasant warm bath, curled up with his father in the big arm chair listening sure and peaceful to his favorite story—a bit of heaven. Contrast that with the little girl crying herself to sleep with gnawing fear as she listens to the bitter quarrel about money going on downstairs filling the house with hate. God sent His Son to show us the ways of love and health; He sent His Son to show man what he really was like when he was well; He sent His Son to show that hate was a symptom no matter in what form—envy, greed, jealousy, selfishness, a symptom of the person starved for love and good family life. Sometimes we have used religion to hide from ourselves rather than to glory in it; so that the doctrine of original sin has been used to cover up parental inadequacies. "Human nature is like that," we say—mean, cruel, selfish, petty, rebellious, betraying. No, sick human nature is like that—sinful human nature is like that; but if the Incarnation means anything it means that well people are like Jesus and that well families are full of the Holy Spirit. This is one reason in the Church we do not accept the current doctrine that many social scientists hold—that hate is as basic to life as love. Man is loving at the core; they love me or hate me because I first love or hate them. It is adults who infect children with all the virus of prejudice and ill-will, who live out the false divisions and segregations which plague us worse than any physical disease. We must grant us parents the willingness to reach out anew for the kind of love we really want to share with our children. Man has created the disorder; man with the help of God must break the chains which shackle him.

The experience of Grant Matthews in the play "The State of the Union" illustrates this. He had made a million dollars and was working to become a presidential candidate, but even before he began to straddle every issue, to fawn and please and scheme, he had failed as a father and a husband. When he came back to his home town they saw through him, and their coldness he began to realize what his wife had said—that Grant Matthews was dead and that he had killed him. And in his own home before that broadcast, with his family, he saw for the first time what he really wanted more than anything else—to come alive again, to regain his self-

respect, to know truth from falsehood, and to be a better husband and father.

We ask, "How does the good society come about, and what can we do?" We can meet in small groups, coming together to frankly share the hope for neighborliness and for play that have lain buried for so long. As the parents of new children we will see our chief work and find our greater pleasure in the nurturing of our young with food that comes from a happy social life with other well families. It means that neighborhoods will begin to explore that equipment necessary to provide social homes for play, for learning, for new skills, and new friends. It means that churches will take barren, little-used parish houses and help to create such centers—Christian family centers for mother, father, and children. It means that religious leaders will look to the sickness in their own families, will take new steps to have the wholesome family life they promised by their ordination, and will administer the Church as a living society of healthy families in which each home is the cell of the body of Christ. It means providing the means to discover more of the laws of wholesome family, and the devotion to family that will bring new hope to those who still yearn for something better than cities now make possible; and most important, it means that for most of us there is only salvation in the family. Our religion began with the family, and thus to walk in this way, and to share it with our children may be one of the best hopes for man, the Church, and for the world.

THE INTERNATIONAL CONGRESS ON MENTAL HEALTH

The following is an excerpt taken from an article on the International Congress, written by Dr. Nina Ridenour, Executive Officer of the International Committee for Mental Hygiene, and appearing in a recent issue of THE RADCLIFFE QUARTERLY. We are indebted for permission to reprint this excerpt to THE RADCLIFFE QUARTERLY.

"As I look back on the year of preparatory work, the International Preparatory Commission, and the Congress itself, several points emerge which seem to be important for future planning. One is a reaffirmation of the vitality of the small group discussion as a method of stimulating thinking. Related to this is the value of the multi-discipline structure of such groups. Many of the Preparatory Commissions throughout the world, and many members of the discussion groups at the Congress expressed the greatest enthusiasm for this method, and eagerness to continue their groups and establish more. It is basic to the success of these groups that they shall include representatives of several different professions or disciplines. Certainly many types of problems are better approached when several different professions meet together, than when each meets with its own kind, with no provision for real communication between groups. When, for example—a psychiatrist, a teacher, a psychologist, and a nurse meet to tackle mutual problems with an anthropologist, a minister, and a social worker, it has been shown that the experience is sometimes salutary for all, and the results often remarkably constructive.

Another old idea reaffirmed at the Congress was the importance of giving our work in mental health in the broadest possible positive terms. It does not mean that we are less interested in mental illness, but that we are more interested in mental health. According to this concept, "prevention" becomes a limiting word, because it suggests preventing a negative condition rather than promoting a positive one, and it makes a difference in how one goes at one's job depending on which of these two is uppermost.

Another idea which was frequently repeated at the Congress was the necessity of spreading an understanding of mental health principles to the people and more people. Mental hygiene is not the monopoly of one or a few professions. Professional workers in mental health will reach more people if they work through other professional and policy making persons. They must strive both to give to and to learn from persons in the allied professions such as teachers, physicians, nurses, ministers of religion. They must work with the people who make policies and mould public opinion such as administrators, legislators, leaders of labor and industry, influential citizens. And they must also learn to utilize the media of mass communication—press, films, radio, and drama—for these are the media which eventually reach millions.

The idea which runs through the entire IPC Statement is that of the plasticity of man and his social institutions, and concomitantly, their malleability. Man makes his institutions; his institutions make man. Both can be modified, for better or for worse. The old adage "You can't change human nature" really means "You can't change human behavior." But now you can change human behavior, and therefore in that sense, you can change human nature. The fact that we always have had wars does not mean that we always must have them. Social scientists are cautious in stating what their contribution can be to the promotion of peace. But they do feel that they have a contribution to make. In the words of the Statement:

"There is no room here for an easy optimism. Men's hopes for world peace have been shattered so often in the past, that we would be doing a disservice to humanity if we did not fully recognize the difficulties which must still be overcome. Nor can we take it for granted that the insights gained by psychiatrists and social scientists will necessarily be employed in the interests of a world community. Just as the discoveries of the physicist can be used to construct or destroy, so too the psychological sciences can either contribute to mental health or they can be exploited to divide and confuse mankind. It is only with a full awareness of these and other obstacles that we can do our work with any prospect of success. There is, however, all the difference between recognizing that a task has immense difficulties, and insisting that it is impossible.

"This then, as we see it, is the ultimate goal of mental health—to help men to live with their fellows in one world."

Throughout the London Congress and the year of preparation preceding it, the same sincerity, the earnestness, the intensity of purpose, and the willingness to work which show through in the words quoted above are evident on the part of the several thousand people who labored to

make the Congress the success that it was. In the midst of shortages and red-tape, the British performed the most superb job of organization that many of us have ever seen. Their hospitality was heart-warming. At the Congress ideas were born and accepted, and friendships were created which will surely further that ultimate goal—"to help men to live with the fellows in one world."

BOOK REVIEWS

CHRISTIAN PATHS TO SELF-ACCEPTANCE, by Robert H. Bonthius; King's Crown Press, New York, 1948; 254 pp.\$3.

It would appear to this reviewer that this is an extremely good book for ministers and for psychiatrists, both in their theoretical discussions and in their practical work. The author almost succeeds where few have succeeded to date. He attempts to bring together the findings of modern medical psychology and the tested truths of the Christian doctrine of man. When these two areas have not been kept separate, they are often presented in confused admixture, or they are forcibly united with first one and then the other taking the ascendancy and acting as the norm for judgment of the other. Any such procedure obviously limits the value of such studies. Such procedures are ably avoided here by Professor Bonthius.

The book confines itself to the single central theme of "self-acceptance", considering it from the viewpoints of Christianity and of dynamic psychology.

By self-acceptance is meant a new version of what the Greeks learned from the Delphic oracle's admonition to "know thyself," and of what Aristotle phrased as the principle, "Friendly relations with one's neighbors . . . seem to have proceeded from a man's relations to himself." This term, defined in the language of psychotherapy, has come to mean the healthy disposition of the individual to recognize the various drives and impulses which are struggling within him and to do so without crippling guilt or fear because of what he finds them to be. Or in other words, "self-acceptance is that attitude which refuses to disparage or ignore any 'part' of the self as evil because it regards them all as capable of utilization properly understood and related."

The author, who is professor of the philosophy of religion at Wooster College, presents the thesis that from a psychotherapeutic point of view it is possible to distinguish three great historical modes of self-acceptance within Christianity, each of which stresses different values and each of which possesses distinctive strengths and weaknesses from the standpoint of mental health. He writes with the conviction that psychotherapy has demonstrated empirically "an effectiveness of method" and rational validity of principle." He presents self-acceptance as a fact already known to medical psychology, which "has demonstrated its importance, explained its nature and worked out effective ways of helping the mentally ill to achieve it." Against his threefold description of Christian spirituality, Dr. Bonthius sets a unified picture of psychotherapy. To this

and take exception, although it is based chiefly on the writings of Christian revisionists with some reference to Jung, for his summary of the happy common to all schools of psychological thought is clear and within compass correct. Brief expositions of basic technical concepts are interestingly illustrated by case discussions based on histories drawn from the works of Alexander and French, Robert P. Knight and Carl R. Rogers. The author finds the chief elements in therapeutic experience to be the attitudes toward the self of expression, responsibility and critical appreciation which are manifested in benevolence to others and freedom of choice in the changing circumstances of life—a psychological exposition of Aristotle's ethical principle.

With this in mind, there is description and appraisal of the three Christian pathways to self-acceptance, named here the rejectionist, the basic and the meliorist. A characteristic quotation from *The Institutes* of John Calvin describes the rejectionist way: “. . . to depart from ourselves that we may apply all the vigour of our faculties to the service of the Lord.” This way, which the author seems to know most intimately, is the service of the Lord in which the self is renounced. It is the way advocated by St. Paul, Augustine, Luther, Calvin, Fox, and Bunyan. All more or less fully represent renunciation and despair of self and the whole of the human organism, and place their hope solely in the transforming work of the Divine Spirit.” This view is based on the conception of the absolute sovereignty of God and the absolute sinfulness and humility of man compared with that sovereignty. This humility seems to the author, known well to most readers, “a necessary but insufficient procedure”, therapeutically allowing a full recognition of the worst in man, yet needing other, more positive doctrines to accompany it.

Basic for the understanding of rejectionism “is the conviction of man's inability to achieve fulfillment. In the last analysis, it is pointed out, Christian thought does not look for completion of life in history even with the aid of Divine Grace; salvation lies always in hope. At the same time what is involved is the attitude of complete dependence, “counting on the reality of God,” in the words of Barth. True rejectionism is marked by the intention to serve God only by forgetting oneself. That such rejectionism is self-acceptance comes about in this way. The rejection of self-centeredness and the realization of the self-defeating character of every form of egocentricity means the realization that the very something which is necessary to integrate life is not within one's own power to produce. Reason before faith, worldly achievement, sensuality, and sexuality are all condemned. But then paradoxically the dependence upon God involves an acceptance of oneself and of one's world. Historically this can be seen in the use of the reason (as, e.g., Calvin's), the sense of stewardship in possessions, the Reformed concern for education, and the like.

The forensic pathway to self-acceptance, as it is found in the legal formalism of Catholicism, is treated with a great sympathy, especially toward its rational ideal of justice. The modern Jesuit theologian, Joseph

Rickaby, is found to give the key to the rule of life: "Since perfect happiness is not to be had in this mortal life . . . it is evidently most important for man in this life so to control and rule himself here as to dispose himself for happiness hereafter." This pathway, although combined with other elements, tends to conceive of life in terms of religious and moral obligation, with strong emphasis upon self-regulation. Its theological basis is found in the conception of God as juridical and rational, the Supreme Law-giver and the First Cause of all that is. In this outlook man's duties are certain, in principle all being made known through natural reason and Divine revelation. The certainty that "man has his requirements", the issue being simply "whether he acts up to them or against them," is obviously significant for self-acceptance, for in this view God in the Church explains man to himself rationally, directs his actions morally and empowers his self-fulfillment sacramentally. The freedom that remains to man in this authoritative world-view is, not freedom from oppressions, but freedom to live at one with the God who sustains life at the self. Dr. Bonthius seems frankly amazed at the frank doctrine of self-love in Catholic eudaemonism, but he rightly decides that it is *sine qua non* of any psychologically sound faith.

The steps upon this forensic way are, first "to realize that one cannot exist by and through himself, and thus to begin to seek and love God as indispensable to . . . one's own existence", as St. Bernard put it. Then one must participate in the life of the visible Church. Dr. Bonthius gives an appreciative picture of its symbolic, imaginative forms and a depreciative picture of its means of authority. In this connection he makes a somewhat illuminating comparison of confession and therapy, the value of which is limited because he does not use his own concept of imaginative forms in his discussion.

The third pathway is best represented by John Wesley, who believes that not only in a loving and in a very personal relationship with God where man's beatitude is to be found, but also this can be progressive though not completely, attained in this life. This path is called the meliorist by the author, because it teaches with confidence that life can be more and more harmonious for man. It is based upon the conception of a loving God who is everywhere operative as redeeming Power and who actually brings about radical subjective changes in responsive individuals and groups. Man cannot be freed completely of temptations and error, but increasingly he can be "full of the work of faith, the patience of hope, the labour of love." The steps on this pathway are first to become conscious of the overall love of God, and next to come to an experience of God's forgiveness of sin and guilt. Having then realized God's benevolence, we "cooperate with His purpose for our lives, and we see the fruit and test of this willing service to God in willing service to our fellow men. The psychological value of this belief in the Divine benevolence is found to be in modern days demonstrated by its analogy with the patient

erience of the therapist's benevolence, for both bear the meaning of
niling love.

There might be comment of course on the richness of the material,
the unexpectedly informed and appreciative presentation of such di-
verse points of view, on the valuable references in the notes, on the useless-
ness of the bibliography, the one place where the volume shows
its origin as a doctoral dissertation. Surely a topical arrangement of
this is more enlightening to the inquirer, or even a listing according to
authors. But there is only one major comment that must be made about
this essay on a most significant theme.

Although the author seems to steer clear of the temptation to use
either science or religion as normative the one for the other, nevertheless
the general impression is unavoidable that he makes the validity of many
religious beliefs to rest ultimately upon their effectiveness in creating self-
sufficiency. This is to make the final test of religion usefulness and not
truth. While no doubt it could and should be maintained that pragmatic
religion is related to reality, as it stands the argument solves the problem,
not by judging religion by psychology, or *vice versa*, but by judging both
religion and psychology by ethics. This seems to come about because the
author apparently espouses a typical American form of the meliorist
view, in which good morals justifies religion. This is a far cry from any
biblical Christian description of justification, and it would be as unaccept-
able to John Wesley as it would be to John Calvin or to Father Rickaby.
To say that a tree is known by its fruits is not to say that a tree is its
fruits. Such a view, at best ethics, at worst moralism, does not allow for
a description of the essence of Christian spirituality but only for its mani-
festations, for the essence of faith is not works but relationship with God.
At this point all psychology of religion faces the question whether it will
grow on and become theology, or rest content in an explanation of religion
which omits its essential character. When this has been said, however, the
great value of the work remains; it will bear careful reading by all
who are concerned with the human soul in all its complexity and who are
concerned with guiding it toward that fullness of life which is the avowed
purpose of religion.

D. S. G.

The reviewer—The Reverend Donald S. Gausby—is a graduate in theology of
Trinity College, University of Toronto, and has had clinical training at the
Norton Memorial Infirmary, Louisville, Kentucky, and has served in the Royal
Canadian Air Force. He is at present a graduate student at the General Theo-
logical Seminary, and at the same time is carrying on studies with The William
Alanson White Institute of Psychiatry.

FUNDAMENTALS OF PSYCHOANALYSIS, by Franz Alexander, M.D.;
W. W. Norton, New York, 1948; 312 pp. \$3.75

To those who are looking for a clear, concise, and very useful survey
summary of psychoanalytic theory, this new volume will commend

itself. For those who have been in clinical pastoral training, or for those who have read fairly widely in the field of psychotherapy, here is an admirably direct discussion of the central organizing concepts of the science, with many leads for further study. This is not particularly a book for beginners (although it is the substance of the author's introductory lectures to medical students), for it presupposes some knowledge of biological and medical theory. In these matters the clear scientific writing will partly solve difficulties of language for the medical layman, and indeed it is itself a good introduction to modes of thought in scientific medicine.

There is here no historical discussion of the development of psychoanalytic theory, as there was in the two editions of *The Medical Value of Psychoanalysis*. This volume is in some measure a partial substitute for a third edition of *The Medical Value of Psychoanalysis*. The earlier volumes told how psychoanalysis developed its theories, this book tells what theories it developed. Dr. Alexander thinks the history confusing to many people because of its controversial complexities. In forming this judgment he apparently overlooked theological readers with their professional predilection for complicated controversy as a mode of formulating thought. The volume therefore pays no attention to the schools of thought and schisms within the movement, but it outlines the operational concepts and central principles of the working science.

The replacement of the older book itself demonstrates the real growth of psychoanalysis from 1932 and 1937 to the present time. It is not possible to present basic principles apart from, as it were, the explanation and excuses of historical extenuating circumstances. It is now proper to present critical discussions that are not polemic nor defensive on the topics of sexuality, ego-psychology, dreams, and psychopathology. It is not necessary to notice cultural anthropology, and it is necessary to discriminate—a particular merit of the Chicago Institute—between psychotherapy, psychoanalysis, and psychoanalytic therapy. It is also necessary to replace the older concept of psychogenesis of bodily dysfunctions with the concept of psychosomatic disorders, but this subject has grown so large that the author has reserved discussion of it to another volume.

The scope of this discussion is almost all of value to the pastor, even more so than the earlier volume. In this discussion the minister will find himself most rewarded by the very penetrating and definitive statements of method, material, limitations, capacities. The everyday pastor will find this a useful reference work. Those interested in theory will find this book in itself very useful and any comparison of it with its predecessors most instructive.

T. J. B.